

House Concurrent Resolution No. 12

92ND GENERAL ASSEMBLY

1439L.011

1 **Whereas**, the use of prescription drugs improves the quality of care and helps
2 patients live healthier, longer, and more productive lives while keeping them out of more costly
3 acute care settings in the long term; and
4

5 **Whereas**, the increased use of new and improved prescription drugs has changed
6 the delivery of health care in the United States since Medicare was enacted, and while two-thirds
7 of the Medicare population has some form of prescription drug coverage, although many times
8 inadequate, one-third of Medicare beneficiaries have no coverage at all; and
9

10 **Whereas**, Congress did not enact a drug benefit in the Medicare program, therefore
11 the program is inadequate in providing the elderly and disabled the most appropriate drug
12 therapies, preventing the delivery of quality health care at an affordable cost; and
13

14 **Whereas**, the private sector provides affordable coverage by negotiating discounts
15 on drugs and meeting the needs of special populations with chronic diseases and those with co-
16 morbidities through coordinating care with disease management, drug utilization review, and
17 patient education programs, all of which aid in ameliorating medical errors; and
18

19 **Whereas**, comprehensive reform of the Medicare program would utilize the
20 successful tools of the private sector in coordinating care for this population and use the
21 marketplace to foster competition among private plans, resulting in more choices of quality
22 coverage for seniors and the disabled while maintaining the financial sustainability of the
23 program; and
24

25 **Whereas**, the failure of Congress to provide for comprehensive reform of Medicare
26 and the encouraging of states to use their own resources to ease the burden of the elderly and
27 disabled Medicare populations, in effect, result in an unfunded informal mandate on the states;
28 and
29

30 **Whereas**, in implementing state programs to assist the Medicare population, state
31 budgetary constraints can often result in requirements to restrict and limit patient access to
32 needed prescription drugs, and the enactment of anti-competitive price controls:
33

34 **Now, therefore, be it resolved** that the members of the House of
35 Representatives of the Ninety-second General Assembly, First Regular Session, the Senate
36 concurring therein, hereby request that the United States Congress enact financially sustainable,
37 voluntary, universal, and privately administered out-patient prescription drug coverage as part
38 of the federal Medicare program; and
39

40 **Be it further resolved** that the Chief Clerk of the Missouri House of
41 Representatives be instructed to prepare a properly inscribed copy of this resolution for each
42 member of the Missouri Congressional Delegation.